



Footprints Day Nurseries Outstanding Practice™ Invoice Payment Information Form

INVOICE PAYMENT INFORMATION FORM

In order for us to collect your payment each month, we need to know how much you intend to pay over from other sources. Please could you fill in the information requested below.

All other payments need to be in our bank account by the 5th of each month, as our direct debit collection will take place on this date.

Parent Voucher 1

Name of voucher company:

Amount of voucher: £.....

Parent Voucher 2 (if applicable)

Name of voucher company:

Amount of voucher: £.....

Any other source of funds to pay your invoice (e.g. employer direct payment)

Please specify source of funds:

Amount to be received by us: £.....